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MDI
10.22.03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hardayal Singh Gill

Attorney Docket No.: SJO9-2001-0007US1

Serial No.: 10/051,859

Examiner: Ometz, David Louis

Filing Date: January 15, 2002

Group No.: 2652

Title: "ANTI-PARALLEL COUPLED FREE LAYER FOR A GMR SENSOR FOR A
MAGNETIC HEAD"

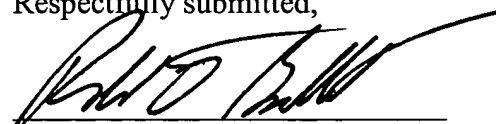
MS Non Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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NOTICE OF COMMON OWNERSHIP

Notice is hereby given that the invention described in this Application Serial No. 10/051,859 and U.S. Patent 6,266,218, issued July 24, 2001 to Carey et al were, at the time the invention was made, owned by, or subject to an obligation of assignment to the same person, that person being International Business Machines Corporation.

Respectfully submitted,



ROBERT O. GUILLOT
Reg. No. 28,852

Dated: October 1, 2003

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CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited on October 1, 2003 with the U.S. Postal Service as first class mail in an envelope addressed to: MS Non Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
Date: October 1, 2003


Patricia Beilmann



#6
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LETTER TO THE OFFICIAL DRAFTSMAN

ATTN: Official Draftsman
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Dear Sir:

Subject to the approval of the Examiner, please substitute the enclosed 1 sheet of amended formal drawings for the formal drawings previously filed with the application.

Date: October 1, 2003

Respectfully submitted,

By

ROBERT O. GUILLOT
Reg. No. 28,852

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Date: October 1, 2003

Patricia Beilmann

2652



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hardayal Singh Gill

Attorney Docket No.: SJO9-2001-0007US1

Serial No.: 10/051,859

Examiner: Ometz, David Louis

Filing Date: January 15, 2002

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Title: "ANTI-PARALLEL COUPLED FREE LAYER FOR A GMR SENSOR FOR A MAGNETIC HEAD"

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AMENDMENT TRANSMITTAL

- ☒ Transmitted herewith is an amendment for this application.

STATUS

- ☒ Applicant is
- ☐ a small entity -- verified statement:
 - ☐ attached.
 - ☐ already filed.
 - ☒ other than a small entity.

EXTENSION OF TIME

- ☐ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/>	one month	\$ 110.00	\$ 55.00
<input type="checkbox"/>	two months	\$ 410.00	\$205.00
<input type="checkbox"/>	three months	\$ 930.00	\$465.00
<input type="checkbox"/>	four months	\$1,450.00	\$725.00

Fee \$ _____

- ☐ If an additional extension of time is required please consider this a petition therefor.
- ☐ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

CERTIFICATE OF MAILING (37 CFR 1.8(a))

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited on October 1, 2003, with the U.S. Postal Service as first class mail in an envelope addressed to: MS Non Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: October 1, 2003

Patricia Beil

- ☒ Applicant believes that no extension of time is required. However, this conditional petition is hereby made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

- ☐ The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OR	OTHER THAN A SMALL ENTITY
Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate
Total *	Minus *0*	=	x9=	\$	x18=
Indep. *	Minus *0*	=	x42=	\$	x84=
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+140=	\$	x280=
			TOTAL ADDIT. FEE	\$	OR TOTAL ADDIT. FEE

- ☒ No additional fee for claims required.
☐ Total additional fee for claims required \$ _____.

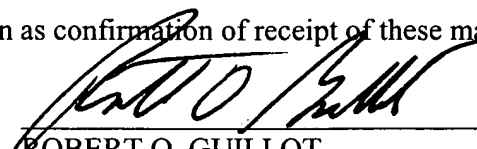
FEE PAYMENT

- ☐ Attached is a check in the sum of \$ _____.
☐ Charge Account No. 08-3240 the sum of \$ _____.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

- ☒ In the event that: a) no check to cover the filing fee is enclosed, b) any above-referenced check is inadvertently omitted or lost, or c) any enclosed check is in an amount less than or greater than the required fee, the Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 08-3240. A duplicate of this authorization is enclosed for that purpose.
- ☒ Attached is a postcard for date-stamped return as confirmation of receipt of these materials.

Date: October 1, 2003


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Reg. No. 28,852

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